

SENATE BILL REPORT

SB 6220

As Reported By Senate Committee On:
Health & Long-Term Care, January 23, 2008
Ways & Means, February 12, 2008

Title: An act Relating to delegation of nursing tasks to care for persons 2 with diabetes.

Brief Description: Allowing the delegation of nursing tasks to care for persons with diabetes.

Sponsors: Senator Keiser.

Brief History:

Committee Activity: Health & Long-Term Care: 1/14/08, 1/23/08 [DPS-WM].
Ways & Means: 2/5/08, 2/12/08 [DP2S].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: That Substitute Senate Bill No. 6220 be substituted therefor, and the substitute bill do pass and be referred to Committee on Ways & Means.

Signed by Senators Keiser, Chair; Franklin, Vice Chair; Pflug, Ranking Minority Member; Carrell, Fairley, Kastama, Kohl-Welles, Marr and Parlette.

Staff: Rhoda Donkin (786-7465)

SENATE COMMITTEE ON WAYS & MEANS

Majority Report: That Second Substitute Senate Bill No. 6220 be substituted therefor, and the second substitute bill do pass.

Signed by Senators Prentice, Chair; Fraser, Vice Chair, Capital Budget Chair; Pridemore, Vice Chair, Operating Budget; Zarelli, Ranking Minority Member; Brandland, Hatfield, Hobbs, Keiser, Kohl-Welles, Parlette, Rasmussen, Regala, Roach, Rockefeller, Schoesler and Tom.

Staff: Chelsea Buchanan (786-7446)

Background: An estimated 15 percent of persons over age 65 have diabetes. Individuals who need help managing their diabetes are restricted by law from allowing anyone but a family member or a licensed health care provider nurse from administering insulin by injection. While current state law permits registered nurses to delegate blood glucose testing to a person whom a nurse deems capable of doing it, insulin injections may not be delegated to

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anyone who does not already have a license to do so. The effect of this restriction has been that people are forced to live in residential care where nursing care is readily available.

As part of maintaining a safe community-based long term care system that supports the provision of services in homes and home-like settings, there is interest in allowing trained persons who are not registered nurses to administer insulin by injection.

Summary of Bill (Recommended Second Substitute): Registered or certified nursing assistants may assist with diabetic insulin device set-up, and verbal verification of insulin dosage for recipients who are sight impaired.

Registered nurses may delegate the administration of insulin by injection to nursing assistants. The registered nurse delegator must supervise and evaluate the individual performing the delegated task weekly during the first four weeks of delegation of insulin injections. The nurse may opt for up to 90 days of supervision.

Nursing assistants must complete specialized training on diabetes care before receiving delegation training.

EFFECT OF CHANGES MADE BY WAYS & MEANS COMMITTEE (Recommended Second Substitute): The intent clause clarifies that nurse delegation of insulin injection for publicly-funded Medicaid clients may only be provided for those who cannot inject themselves or who do not have an appropriate support system to do so.

EFFECT OF CHANGES MADE BY HEALTH & LONG-TERM CARE COMMITTEE (Recommended First Substitute): The delegation was expanded to include registered nursing assistants. Training should include sliding scale insulin orders.

Appropriation: None.

Fiscal Note: Available on original bill. Second substitute requested on February 13, 2008. [OFM requested ten-year cost projection pursuant to I-960 – on Original Bill.]

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony on Original Bill (Health & Long-Term Care): PRO: Many older people with diabetes living in the community are forced to move to a residential facility with nursing services just because they need a registered nurse to provide insulin injections. In areas where health care services are difficult to access, people with diabetes need trained individuals to help with insulin administration. It is possible to train non-licensed people to do this. The nurse delegation regulations work well. This bill should be expanded to include registered nursing assistants.

OTHER: Registered nursing assistants have very little medical training. Insulin is a serious medication and the people who administer it should have more than a few hours of training in providing health care services.

Persons Testifying (Health & Long-Term Care): PRO: Gary Weeks, Washington Health Care Association; Mike Moran, Hoh, Samish, and Umatilla Tribes; Kathy Leitch, Department

of Social and Health Services; Wendy Mitchell, Washington State Residential Care Council; Sally Watkins, Washington State Nurses Association; Dennis Eagle, Washington Federation of State Employees; Deb Murphy, Bonnie Blachly, Washington Association Housing and Services for the Aging; Nora Kelley, Service Employees International Union Healthcare 775 NW.

OTHER: Louise Ryan, LTC Ombudsman Program.

Staff Summary of Public Testimony on Recommended First Substitute (Ways & Means): PRO: This bill will enable more seniors and people with disabilities on Medicaid to remain in their homes, and should save state money. It will also reduce costs for private pay patients, who could pay for nurse assistant rather than paying for a nurse. Delegation is safe and effective in reducing costs. Many other states do this, including Oregon. The bill has a strong education and oversight component for safety. Training costs might be lower than what the original fiscal note says.

Persons Testifying (Ways & Means): PRO: Karen Keiser, prime sponsor; Gary Weeks, Vicki McNeally, Washington Health Care Association.